

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2008 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4618).)		Docket Number (Optional) 0425-1178PUS1	
Application Number 10/525,458-Conf. #3849		Filed September 28, 2005	
For PAPER QUALITY IMPROVER			
Art Unit 1731		Examiner D. R. Cordray	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
<input checked="" type="checkbox"/>	One month (37 CFR 1.17(a)(1))	Fee	
		Small Entity Fee	
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$120	\$60 \$ 120.00
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$460	\$230 \$
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$1050	\$525 \$
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$1640	\$820 \$
<input type="checkbox"/>		\$2230	\$1115 \$
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>02-2448</u> . I have enclosed a duplicate copy of this sheet.			
I am the <input type="checkbox"/> applicant/inventor.			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.			
<input type="checkbox"/> Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>32,881</u>			
<input type="checkbox"/> attorney or agent under 37 CFR 1.34.			
<input type="checkbox"/> Registration number if acting under 37 CFR 1.34 _____			
_____ Signature		<u>OCT 24 2007</u> _____ Date	
<u>John W. Bailey</u> _____ Typed or printed name		<u>(703) 205-8000</u> _____ Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input type="checkbox"/> Total of <u>1</u> forms are submitted.			